PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10-313307

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_				FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS				66.				RATE	. FEE	ᄀ.	RATE	FEE
FOR			NUMBE	RFILED	NUMBER EXTRA			BASIC FE	E 385.0	O OR	BASIC FEE	770.00
Т	OTAL CHARGI	EABLE CLAIMS	.66m	inus 20=	• 2	16		X\$ 9=		OR	VS40	828
IN	DEPENDENT	CLAIMS	5 minus 3 =			2		X43=	-	7	You	
М	ULTIPLE DEPE	ENDENT CLAIM F	RESENT							OR		172
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+145=		OR	+290=	
CLAIMS AS AMENDED - PART II								TOTAL	L	OR	TOTAL	0171
	`	(Column 1)	AMENDE	(Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	X\$ 9=		OR	X\$18=	1 6-6-
4ME	Independent	*	Minus	***		= .		X43=		OR	X86=	
_	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		-					
							L	+145= TOTAL		OR	+290= TOTAL	
		(O = 1 1)			. •		AD	DIT. FEE		OR ,	ADDIT. FEE	
		(Column 1)	1	(Columi		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FÉE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=	;	K\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	Ÿ
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145				
								145=		OR	+290= TOTAL	
	,			•			ADE	IT. FEE	•	OR A	DDIT. FEE	
Т	<u> </u>	(Column 1)		(Column	(2)	(Column 3)	· .		٠.			
ובואו כ		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u>ة</u> [Total	*	Minus	**		= -	X	\$ 9=		OR	X\$18=	
5 L	Independent		Minus	###		=	T _x	43=			X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM					OR	×00=	
· If (the entry in colum	nn 1 ie lees than th-			• : •	0	. +1	45=	<u>. </u>	OR	+290=	
" II '	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR AC	TOTAL DIT. FEE	
Tì	ne "Highest Numl	nber Previously Paid ber Previously Paid	For (Total or I	SPACE is le ndependent)	ss than is the h	3, enter *3.* ighest number fo		T. FEE L	opriate box			
	•					•						